

1.) CORPORATION NAME:

SMITH MOUNTAIN LAKE ASSOCIATION INC.

DUE DATE: **5/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

OFFICER

GALE L TAYLOR

400 SCRUGGS RD STE 2100

MONETA, VA 24121

SCC ID NO: **01264589**

5.) STOCK INFORMATION

CLASS

AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

FRANKLIN COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 400 SCRUGGS RD STE 2100

CITY/ST/ZIP: MONETA, VA 24121-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: KRISTINA MIZE
TITLE: PRESIDENT
ADDRESS: 499 PERIWINKLE RD
CITY/ST/ZIP/CO: MONETA, VA 24121-

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OFFICER

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DIRECTOR

NAME: GALE L TAYLOR
TITLE: SECRETARY
ADDRESS: 275 HAMPTON DR
CITY/ST/ZIP/CO: UNION HALL, VA 24176-

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OFFICER

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DIRECTOR

NAME: TOM HOFELICH
TITLE: TREASURER
ADDRESS: 106 FREEBOARD DR
CITY/ST/ZIP/CO: MONETA, VA 24121-

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OFFICER

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DIRECTOR

NAME: PETER LEWIS
TITLE: ASST TREASURER
ADDRESS: 3862 HICKORY COVE LN
CITY/ST/ZIP/CO: MONETA, VA 24121-

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OFFICER

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DIRECTOR

NAME: LEE BORGMAN
TITLE: DIRECTOR
ADDRESS: 240 CAMBRIDGE CT
CITY/ST/ZIP/CO: HARDY, VA 24101-

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OFFICER

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DIRECTOR

NAME:	BILL BRUSH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	81 LIGHTHOUSE LN		
CITY/ST/ZIP/CO:	MONETA, VA 24121-		
NAME:	JIM BUCHANAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1796 DUDLEY AMOS RD		
CITY/ST/ZIP/CO:	MONETA, VA 24121-		
NAME:	BOB CAMICIA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	143 CHARLOTTE LN		
CITY/ST/ZIP/CO:	HARDY, VA 24101-		
NAME:	LARRY ICEMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	562 FOX CHASE RD		
CITY/ST/ZIP/CO:	WIRTZ, VA 24184-		
NAME:	JOHN LINDSEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	320 FINGERLAKE RD		
CITY/ST/ZIP/CO:	PENHOOK, VA 24137-		
NAME:	CHARLIE MARSHALL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	77 PACIFIC AVE		
CITY/ST/ZIP/CO:	MONETA, VA 24121-		
NAME:	MICHAEL MCEVOY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2584 INGLEWOOD RD		
CITY/ST/ZIP/CO:	ROANOKE, VA 24015-		
NAME:	DORIS NEUDORFER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	203 LEE DR		
CITY/ST/ZIP/CO:	HUDDLESTON, VA 24104-		
NAME:	STANLEY W SMITH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	199 WINDMERE POINT		
CITY/ST/ZIP/CO:	MONETA, VA 24121-		
NAME:	RANDY STOW	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1746 MALLARD POINT RD		
CITY/ST/ZIP/CO:	WIRTZ, VA 24184-		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TIM TINGLER DIRECTOR 11509 OLD FRANKLIN TRNPK UNION HALL, VA 24176-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JIM PILVERSACK DIRECTOR 105 CHARLOTTE LN HARDY, VA 24101-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RUSS JOHNSON VICE PRESIDENT PO BOX 874 HARDY, VA 24101-	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LUCY BAILEY DIRECTOR 1854 ASHWELL RIDGE DR HUDDLESTON, VA 24104-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICIA DADE DIRECTOR 996 OLD FRANKLIN TURNPIKE ROCKY MOUNT, VA 24151-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RUSSELL MACMULLAN, JR DIRECTOR 127 PACIFIC AVENUE MONETA, VA 24121-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TERRY NAYLOR DIRECTOR 202 MINTON CIR MONETA, VA 24121-	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ GALE L TAYLOR		GALE L TAYLOR, SECRETARY	
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT		DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			